



Managing the Medicaid program to provide the best healthcare value for South Carolinians.

July 19, 2010
FOR IMMEDIATE RELEASE

Contact: Jeff Stensland
(803) 898-2584
stensland@scdhhs.gov

S.C. Medicaid to Expand *Healthy Connections Choices* Care Coordination Program

COLUMBIA, S.C.— The SC Department of Health and Human Services (SCDHHS) is seeking approval from the federal Centers for Medicare and Medicaid Services to expand its *Healthy Connections Choices* care coordination program beginning in October. This change will require that eligible beneficiaries receive care coordination through either a Medicaid Managed Care Organization (MCO) or the state's existing Medical Homes Network (MHN).

Currently, more than 474,000 South Carolina Medicaid beneficiaries are enrolled in either an MCO or the MHN through *Healthy Connections Choices* (see attached fact sheet). This change will mean that about 100,000 of the existing Medicaid population now in traditional "fee-for-service" Medicaid will be added to the *Healthy Connections Choices* program.

Healthy Connections Choices began in August 2007 and offers eligible beneficiaries the choice of several care coordination plans in their county (see attached map). The plans offer the same benefits as traditional Medicaid, but also extra services like unlimited doctor visits with no co-pays, eyeglasses and dental care for adults, access to smoking cessation classes and programs specifically tailored for those with chronic diseases.

Beginning this fall, those now enrolled in traditional Medicaid who are eligible for care coordination will be asked to choose a plan at the time of their annual review. If they do not make a choice, a plan will be selected for them. Newly eligible Medicaid beneficiaries will be asked to select a plan available in their county at the time they enroll. Certain categories of Medicaid beneficiaries, such as those who receive Medicare benefits, Medicaid waiver enrollees, disabled children and foster children will not be required to join a plan.

Care coordination encourages appropriate utilization of the health care system and helps establish a strong relationship between patients and their primary care physicians. Eight out of 10 beneficiaries who participate in a Medicaid coordinated care plan through *Healthy Connections Choices* indicate they are very satisfied with the care and services they receive. Independent quality reports demonstrate that on average these beneficiaries receive higher rates of disease screenings, well-child visits, prenatal care and dental visits than those not enrolled in a coordinated care plan.

—MORE—

Care coordination not only benefits patients, but also allows the state to better manage significant enrollment increases. Since the recession officially began in December 2007, more than 88,000 residents have been added to the South Carolina Medicaid program, now averaging between 3,000 and 5,000 new enrollees per month. Beginning in 2014, an additional state 480,000 residents are expected to join Medicaid through the recently enacted national health care reform.

“Healthy Connections Choices ensures Medicaid beneficiaries have access to quality primary care that focuses on disease prevention and proper utilization of the healthcare system,” said SCDHHS Director Emma Forkner. *“Care coordination is critical to effectively managing the influx of new Medicaid enrollees while keeping long-term healthcare costs contained.”*

To assist in plan selection, SCDHHS offers enrollment counseling services to eligible beneficiaries so they can choose the plan option that works best for them. Those dissatisfied with their plan have 90 days to switch after their initial selection. Medicaid beneficiaries who want to learn more about available plans in their county should contact *Healthy Connections Choices* at **877-552-4642** or visit **www.scchoices.com**.

About SCDHHS: *SCDHHS provides comprehensive health care coverage to more than 930,000 Medicaid eligible residents each year. Medicaid is financed jointly by the state and federal governments and primarily serves low-income and disabled residents. The agency also is responsible for overseeing special Medicaid waiver programs operated by other state agencies. Visit www.scdhhs.gov to learn more.*

###



Enrollment Statistics

Total Managed Care members (MCO and MHN)	474,889
MCO members	366,185 (53.63%)
MHN members	108,704 (15.92%)

Managed Care Organizations

A Managed Care Organization (MCO) is a care coordination plan that contracts with a network of primary doctors, hospitals and specialists to provide patient care. The state Medicaid agency pays the MCO a per-member, per-month fee to provide needed care within the network. This fee is based on actuarial information pertaining to average cost of beneficiary care.

	Approved Counties	Enrollment
Absolute Total Care by TCC	42	83,546
BlueChoice Health Plan of South Carolina	40	25,366
First Choice of South Carolina	46	192,273
Unison Health Plan of South Carolina	41	65,000

Medical Homes Network

A Medical Homes Network (MHN) is a case management system made up of primary care physicians. These physicians are paid an additional case management fee to provide care coordination and can refer patients to specialists.

	Approved Counties	Enrollment
South Carolina Solutions	46	108,704

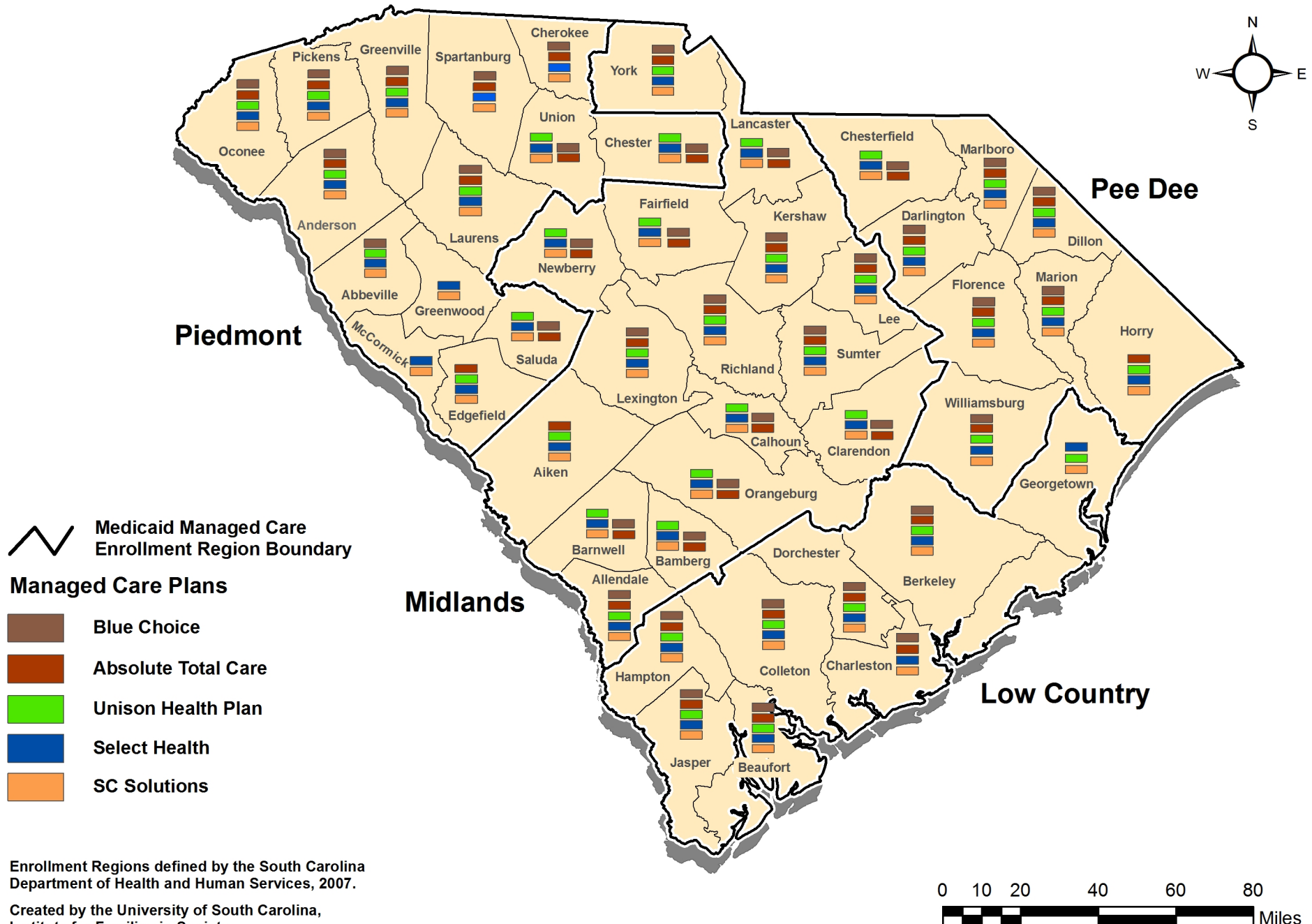
Quality of Care:

Coordinated Care plans in SC out perform traditional Medicaid. Plans score higher on the following measures*:

- Lead screening in children
- Well-Child Visits in the First 15 Months (1-5 visits), (3-6 years)
- Annual Dental Visits (2-3 years; 4-6 years; 7-10 years; 11-14 years; 15-18 years)
- Adult Access To Preventive/Ambulatory Health Services (Ages 20-44 years)
- Breast cancer screening
- Prenatal care
- Appropriate Treatment for Children With Upper Respiratory Infections (5-9 years; 10 – 17 years)
- Treatment for chronic illnesses such as diabetes and asthma

SC Healthy Connections Managed Care Plans by County

July 1, 2010



Enrollment Regions defined by the South Carolina Department of Health and Human Services, 2007.

Created by the University of South Carolina, Institute for Families in Society.
Updated as of July 1, 2010.